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2014 MAR 18 PM 12: 22

FEC MAIL CENTER

Committee Name:	FEC MAIL CENTER
America for Technocratic Action	
If registered, FEC ID:	
Today's Date:	
03/10/2014	

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

Re: Form 1, Statement of Organization-Unlimited Contributions

To Whom It May Concern:

Respectfully submitted,

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Treasurer's Name:

Andrey Aleshintsev

Treasurer

4031200094

FORM 1

Use

Only

STATEMENT OF **ORGANIZATION**

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(Revised 06/2012)

					Office Use Only 12: 22
NAME OF COMMITTEE (in full)		eck if name nanged)	Example: If typing, to over the lines.		INSC MAILICENTER
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IA.T.A.	1111				
ADDRESS (number and street)	2770	Diciela	N. A.V.C.N.U.	e, suit	«, 5A, , , , , , ,
(Check if address is changed)		<u> </u>		1 1 1 1 1	
	BIR O O	K, &, Y, N,		STATE A	[1,1,2,2,4]-[] ZIP CODE
COMMITTEE'S E-MAIL ADDRE	SS				
(Check if address is changed)	alles	Lints	e, v@3, x, a, i,	1,.,c,o,n,	
		cond E-Mail Ad a ₁ + ₁ a ₁ c ₁ +	dress 1 0 N - 0 R g		
COMMITTEE'S WEB PAGE ADI	• •	<u>a,+,a,e,+</u>	;i,o,w,.,o,R,y	1 1 1 1 1	
2. DATE 0 3	0 Z 0	1 4			
3. FEC IDENTIFICATION N	JMBER ▶	C	ones de la company de la company.		
4. IS THIS STATEMENT	NEW (N)	OR	AMENDE	D (A)	
I certify that I have examined the	nis Statement a	and to the best	of my knowledge and	belief it is true, co	rrect and complete.
Type or Print Name of Treasure	And	REY A	Leshintseu	/	
Signature of Treasurer	Altria	Free		Date	03/10/2014
NOTE: Submission of false, errone			may subject the person ON SHOULD BE REPO		ent to the penalties of 2 U.S.C. §437g. DAYS.
Office			For further information (FEC FORM 1

Toll Free 800-424-9530 Local 202-694-1100

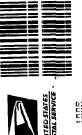
F	2	a	_	2

		OMMITTEE • Committee:
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
Nam Cano	e of didate	
	didate y Affiliati	Office State on Sought: House Senate President District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
Nam Can	e of didate	
Par	ty Con	nmittee:
(d)		This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.
Poli	itical A	ction Committee (PAC):
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a
		Corporation Corporation w/o Capital Stock Labor Organization
		Membership Organization Trade Association Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.
(f)	V	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
		In addition, this committee is a Lobbyist/Registrant PAC.
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
Join	ıt Func	Iraising Representative:
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
	Com	mittees Participating in Joint Fundraiser
	1.	FEC ID number C
	2.	FEC ID number C
	3.	FEC ID number C
	4.	

FEC Form 1 (Revi	sed 02/2009)	Page 3
Write or Type Committee I	America for Technocratic A	Action
6. Name of Any Connect	ed Organization, Affiliated Committee, Joint Fundraising Repres	sentative, or Leadership PAC Sponsor
AMERICAL 16	OR TIEICH MOICIRIAITIICI MICITION	1
Mailing Address	12/7/7/01 Occar Alvenue Su	ijt 5 A
	BROOK 1 YM 1 1 1 1 1 1	
Relationship: Conn	ected Organization VAffiliated Committee Joint Fundraising R	
7. Custodian of Records: books and records.	Identify by name, address (phone number optional) and position	n of the person in possession of committee
Full Name	DIRIEN ALLES HIMITIS EN	
Mailing Address	12,7,7,0, Dicielain Airienul Air	t, s.A.
	DROOKISM	W.Y [1,1,2,2,4]-
Title or Position	CITY	STATE ZIP CODE
Tireidsinire	Telephone numb	per [3,4,1]-[6,4,4]-[1,4,6,4
8. Treasurer: List the name any designated agent (e	e and address (phone number optional) of the treasurer of the c.g., assistant treasurer).	committee; and the name and address of
Full Name of Treasurer	dr.E.V. Alleshintsev	
Mailing Address	12,7,7,0, 10,0,0,0, A,V, e,N,U, e, A,p	t. 5.A.
	Direioloikilizim city s	WY 11224-
Title or Position [T, N, C, a, S, U, R, C	Telephone number	er 13,4,71-16,4,91-14,9,6,9

				
	·			
Full Name of Designated Agent	NOREY, Aleshintsey,			
Mailing Address	12,7,7,0, Dicierain, Ariena	c, Apt, 5,	A	
	Dirioioikilyin	ואיש וי	1,1,2,2,9-	
Title or Position	CITY	STATE	ZIP CODE	
TREASING	R ₁ e ₁ R ₁ Teleph	one number 3	4,71-16,99-14,969	
		· · · · · · · · · · · · · · · · · · ·		
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc.				
IC	16, a, 5, c, BANK,			
Mailing Address	[1,7,2,2, A,v,e,0,u,e,0,			
		1 1 1 1 1 1		
	Da.o.o.k.l.z.	N.Y.	[1,1,2,2,4]-	
	CITY	STATE	ZIP CODE	
Name of Bank, Depo	ository, etc.			
L				
Mailing Address				
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	CITY	STATE	ZIP CODE	

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DATE PREPARED

(8/2013)